

HCBS Rent Subsidy Program

How can I get help with my rent?

- If you're receiving residential-based services under one of the following Medicaid waivers:
 - Health & Disability
 - o AIDS/HIV
 - Elderly
 - Intellectual Disability
 - Brain Injury
 - o Physical Disability
- If you're paying more than 30% of your income for rent
- If you're on a waiting list for other local or federal rent assistance programs, such as Section 8, or if the waiting list is currently closed
- If you're not currently receiving any other rent assistance



If you answered yes to all these, then you might qualify to apply for HCBS Rent Subsidy.

How do I apply for HCBS Rent Subsidy?

- Complete an application found at <u>IowaFinanceAuthority.gov/HCBS</u>
- Instructions for completing the application are also found on that webpage
- Include the following with your application:
 - Proof of your monthly income, such as SS/SSI award letter, bank statement showing the direct deposits and wage reports/pay stubs for the last three months if you have a job
 - Proof that you have applied for other rental assistance programs and are on a
 waiting list or a letter stating that you were determined to be ineligible or that the
 waiting list is currently closed
 - Include a current copy of a signed lease showing the number of bedrooms and total rent for your entire rental unit
 - Bank routing number and account number so funds can be directly deposited into your checking or savings account, or that of your payee

If I get HCBS rent assistance, then what do I need to do?

- Submit a renewal application every year you will be notified by letter when it is due
- Include everything required for the first application when you submit the renewal
- Notify Iowa Finance Authority within 10 days when any of the following change:
 - o Your name, address, email address or phone number
 - o Rent amount
 - o You become eligible for a local or federal rent subsidy program, like Section 8
 - Payee and/or contact information
 - o Case manager and/or contact information
 - Your income
 - o Number of dependent relatives living with you
 - You lose the Medicaid waiver

Contact

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